CHIA Standard Statistics:

Average Commercial Member Cost-Sharing Level



Time Period/Data Year(s): CY2011 - CY2014

Governing Legislation: M.G.L. c. 12C, section 10; Regulation 114.5 CMR 21.00 [Note: a new regulation is pending]

Description	CHIA's Cost-Sharing statistic measures average cost-sharing—the sum of deductible, copays, and co-insurance—for all covered health care services received by members of private commercial health plans in Massachusetts. Expressed on a per member per month (PMPM) basis, cost-sharing is calculated as the difference between aggregate allowed and incurred claims, divided by total member months. Cost sharing does not account for any employer or employee saving plan reimbursements (e.g., HRAs, HSAs).
Frequency	Member cost-sharing data is collected as part of the Annual Premiums Data Request, which is released each February, with data submissions requested by mid-/late-May.
Statutory Definition	CHIA is directed to report on "changes in the benefit and cost-sharing design of plans."
Data Submitters	Top 10 private commercial payers in the Massachusetts health insurance market.
Data Included	Payers submit aggregate data for their primary, medical, and commercial Massachusetts contract-membership for the previous three calendar years. Submitted data falls into two categories: membership and financial, as outlined below. Membership: Contract-member months by funding type (fully-/self-insured), market sector (employer size), product type (HMO/PPO), benefit design (High Deductible Health Plan/Tiered Networks), and demographics (age, gender, and region). Financial: Premiums (incl. Premiums Net of MLR Rebates), Allowed Claims, Incurred Claims, "3R" Amounts, and Administrative Service Fees (Self-insured only) by all membership breakouts. Combined, submitted member months, allowed claims, and incurred claims data allow CHIA to calculate Massachusetts' cost-sharing as an average PMPM.
Quality Assurance Process	Data submitted as part of the Annual Premiums Data Request undergoes a two-stage quality assurance and verification process: 1. Internal & External Validity Checks: Along with CHIA's actuary, CHIA runs internal and external validity checks on all payer-submitted data. Internal validity checks are run on payer-submitted data for point-in-time and trend consistency and reasonableness. External checks are also run, comparing payer-submitted data against other payer-submitted state and federal reports, including the Supplemental Health Care Exhibit, the Massachusetts Annual Comprehensive Financial Statement, and the CCIIO Medical Loss Ratio Reporting Form. Where discrepancies are found and confirmed, CHIA requests revised data submissions

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	from payers.
	2. PMPM Validation: After a payer's submission passes CHIA's internal and external validity checks, CHIA asks payers for final verification of key PMPM figures prior to reporting. (Note: only critical PMPMs are returned to payers for verification—this limits verification to approximately 200 values, compared to the thousands possible.)
Reports	 Cost-sharing data are profiled in CHIA's Annual Report on the Performance of the Massachusetts Health Care System (Released each August/September) Performance of the Massachusetts Health Care System Briefing Series (Released each Fall/Winter) Reports include databooks, chartpacks, and technical appendices.
Data Notes	 Important notes about data received from the Annual Premiums Data Request: Massachusetts contract-membership includes non-Massachusetts residents. Starting with the 2015 analysis (CY2012-14 data), average cost-sharing was scaled to account for the "percent of benefits not carved out" (e.g., pharmacy or behavioral health). Previous reported data were not scaled. Each year's premium's submissions include slight methodological refinements and the addition of several payers. See relevant technical notes.
How to Obtain Data	Most aggregate data from the Annual Premiums Data Request are published each year in databooks on CHIA's <u>website</u> concurrently with the reports noted above.
Related CHIA Measures	CHIA's average Cost-Sharing statistic measures the actual dollar amounts paid by members, while CHIA's Health Insurance Benefit Level statistic measures the percentage of claims dollars that members pay. Massachusetts Health Insurance Survey also collects and presents information for several cost-sharing measures, including: the percentage of respondents with out-of-pocket health care spending over \$1,000 and over \$3,000 in the previous twelve months, and the percentage of respondents that had difficulty paying medical bills in the previous twelve months.
Questions?	Questions may be directed to Kevin McAvey, Manager of Analytics, at Kevin.McAvey@state.ma.us, or Kevin Meives, Senior Health System Policy Analyst, at Kevin.Meives@state.ma.us.